



M E D I A R E L E A S E

STATE OF TENNESSEE
DEPARTMENT OF FINANCE & ADMINISTRATION

FACT SHEET
JANUARY 22, 2004

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TENNCARE ENROLLEE RENEWAL PROCESS

- Renewal is an annual process that all TennCare enrollees must complete to continue their coverage.
- TennCare enrollees must renew for three reasons
 - To determine if current enrollees are still eligible for TennCare benefits to maintain the integrity of the eligibility system by ensuring only those eligible receive benefits
 - To ensure the TennCare Bureau has the correct information on file for enrollees
 - To comply with state and federal laws.
- The Medicaid population renews coverage throughout the year in a separate process.
- TennCare will mail notices to about 15,000 households each month to better manage Human Services worker loads. (The average TennCare Household is approximately 4 individuals).
- During renewal, TennCare will check for:
 - Enrollee name
 - Enrollee address
 - Income status
 - Access to insurance
 - Confirmation of qualifying medical condition when necessary
- TennCare enrollees will renew coverage once about every 12-15 months through a "rolling notification" process. TennCare and Human Services will continuously work together as approximately 15,000 TennCare households are notified every month about the need to begin their annual renewal process.
- Enrollees with questions can call the TennCare information line at 1-800-669-1581.

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